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ABSTRACT

Many factors affect the way in which others view the parents of a child who has committed suicide. A study of adult responses to newspaper accounts of a child's death revealed the parents were viewed more negatively when the child's death was due to suicide than when the child's death was a result of illness. In addition, the presence of environmental pressures which reduced potentially negative perceptions of parents whose child died from illness did not have a similar impact when the child's death was from suicide. Results suggest that parents whose child commits suicide are likely to encounter attitudes which are more negative in general; they may also find that factors which often mitigate negative judgements in other circumstances may not be applicable when the death is from suicide. (Author/JAC)

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The Aftermath of Childhood Suicide: Influences on the Perception of the Parent

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The Aftermath of Childhood Suicide: Influences on the Perception of the Parent

Dealing with the reaction of persons outside the family can be a significant source of distress for the surviving family of the suicide (Cain, 1972; Rudestam, 1977). A negative and judgmental social interpretation of suicide can intensify the problems faced by the newly bereaved family members and at the same time, restrict or diminish the interpersonal resources otherwise available to them. Such social factors may help to account for the potentially greater distress of some family members following a suicidal death than that following other forms of death (Sheskin & Wallace, 1976). The present investigation examined factors affecting the way in which other people view the parents of a child who has committed suicide.

In seeking explanations for the behavior of children, parents are one socially prominent potential source of perceived influence. A desire to be viewed as a "good parent", as judged by the socially desirable behavior of children, appears common. The perception of parents as potential causal agents for the behavior of children is also central in a variety of therapeutic strategies for children. The self-destructive actions of a child might be one form of behavior likely to lead to attributions of parental responsibility by others, as well as feelings of responsibility on the part of parents themselves.

A negative social climate following a child's suicide might be especially troublesome, though little systematic work is available on the

characteristic reactions that parents of the child suicide will encounter. Calhoun, Selby and Faulstich (1980) reported that parents of children who killed themselves tended to be liked less and blamed more for the death of the child than parents whose child died of natural causes. Factors which might alter viewing parents of the child suicide negatively have not yet been investigated.

The presence of environmental pressures on the child is one factor which suggests itself as a potential mitigator of parental blame, for at least two reasons. First, suicidal behavior tends to be viewed as caused by environmental pressures (Selby & Calhoun, 1975) or as "something that happens to a person" (Ginsburg, 1971, p. 206). To the extent that external pressures are brought to the attention of the perceiver, then, one could expect an increase in the perceived role of environmental factors and a decrease in attribution of parental blame. Second, attribution theory (Kelley, 1973) has suggested that a specific cause (e.g., parental blame) will be discounted if other potential causes are available (e.g., school failure). We might expect, then, that for instances of child suicide in which environmental pressures are made salient, negative social perceptions of the parents will be reduced. The purpose of the present paper was to further evaluate the degree to which parents of the child suicide face negative social perceptions, and the potential mitigating effect on parental blame of environmental pressures.

Method

Participants in the study were 148 adults from a large city in the southeastern United States. The age range was from 17 to over 65, with 94% of the respondents between the ages of 17 and 55. Forty-six percent

were married, 40% were single, and 14% were divorced, separated or widowed. There were 77 males and 71 females.

Four different descriptions of a child's death were prepared with the help of a newspaper reporter[1]. The stories were set in type and described a 10-year-old boy[2] who died either by hanging himself or from a viral disease. The child was described as either not experiencing success at school and having failed a series of tests (environmental pressure), or as experiencing success in school and having just passed a series of tests. With the inclusion of the sex of respondents in the analysis, the resulting design was a 2 (male or female respondent) x 2 (suicidal or viral death) x 2 (school failure or school success).

Based on previous research (Calhoun, Selby, and Faulstich, 1980; Coie, Pennington, & Buckley, 1974) 12 items, each accompanied by a 7-point rating scale, were employed to assess perceptions of the incident. Items measured perception of the psychological disturbance of the child, psychological disturbance of each parent before the death, perceptions of responsibility of each parent for the death of the child, feelings of guilt of both parents, how aware each parent could have been of potential problems of the child, expected liking for each parent, and whether the newspaper account should have revealed the cause of the child's death. For all items, higher ratings indicated greater endorsement (e.g., 1=not responsible at all ... 7=completely responsible).

Potential participants were approached at a large shopping mall and asked if they would be willing to take part in a study of reactions to newspaper stories about a child's death. One hundred and sixty-nine were approached and

148 completed participation. Before taking part in the study all individuals were asked to sign an informed consent form which indicated they had been told the purpose of the study and that they were free to discontinue participation at any time.

Each participant read one newspaper account and then responded to the questions which followed the story. After participation was completed individuals were given the opportunity to ask questions and were told how they could contact members of the research team if they had additional questions.

Results

A 3-way (type of death, by success/failure in school, by sex of respondent) multivariate analysis of variance was conducted on the 12 rating scales using Pillai's Trace criterion. There were significant multivariate main effects for type of death $F(12,129)=22.6$, $p<.0001$ and for success/failure in school $F(12,129)=6.2$, $p<.001$. There was one significant interaction effect involving type of death by school success/failure $F(12,129)=1.8$, $p<.05$.

The type of death (suicide vs viral disease) produced widespread effects in perceptions. Significant differences in ratings on all 12 items occurred as a function of the type of death of the child. As expected, the child who committed suicide ($M=5.4$) was rated as more psychologically disturbed than the child who died of natural causes ($M=2.2$), $F(1,140)=200.9$, $p<.001$. The mother of the child suicide ($M=3.5$) was rated as more likely to have been aware of potential problems of the child before they became too serious than the mother of the child who died from natural causes ($M=2.1$), $F(1,140)=19.4$, $p<.0001$; similar differences were obtained on the ratings of the father's

awareness of problems (M=4.4 vs. M=3.1), $F(1,140)$=18.2, $p<.001$. Parents of the child who committed suicide were seen as more psychologically disturbed before his death than the parents of the child who died of natural causes; the mean ratings for mothers were M=3.7 and M=2.2, $F(1,140)$=32.8, $p<.001$ and the mean ratings for fathers were M=3.7 and M=2.1, $F(1,140)$=49.1, $p<.001$ respectively. Respondents viewed the parents of the child who committed suicide as more responsible for the child's death than the parents of the child who died of natural causes; the mean ratings for mothers were M=4.2 and M=1.9, $F(1,140)$=102.4, $p<.001$ and the mean ratings for fathers were M=4.1 and M=2.1, $F(1,140)$=77.3, $p<.001$. Ratings of the feelings of guilt respondents expected the mother and the father to have, showed a pattern similar to the ratings of attributed responsibility. When the child had committed suicide, mothers and fathers were expected to feel more guilty for the child's death than when the child had died of natural causes; for mothers, mean ratings of expected guilt were M=5.3 and M=3.7 respectively $F(1,140)$=30.8, $p<.001$ and for the fathers they were M=4.8 and M=3.5 respectively $F(1,140)$=19.3, $p<.001$. Respondents also indicated a greater liking for the parents of the child who died of natural causes than for the parents of the child who committed suicide; mean rating of liking for the mother of the child who died from a viral disease was M=4.5 while mean rating of liking for the mother of the child who committed suicide was M=3.7, $F(1,140)$=19.8, $p<.001$; liking for the father followed the same pattern with mean liking ratings of M=4.5 for the father of the child who died of viral disease and M=3.8 for the father of the child who committed suicide $F(1,140)$=17.8, $p<.001$. Finally, respondents indicated that the news-

paper should not have published the cause of the child's death to a greater extent when the child had committed suicide, $\underline{M}$=4.0, than when the child had died of natural causes, $\underline{M}$=2.6, $\underline{F}(1,140)=18.5$, $\underline{p}<.001$.

Reliable main effects of the child's success or failure in school were observed on three variables: perceived psychological disturbance of the child $\underline{F}(1,140)=22.8$, $\underline{p}<.001$, mother's awareness of potential problems, $\underline{F}(1,140)=18.6$, $\underline{p}<.001$, and father's awareness of potential problems $\underline{F}(1,140)=21.3$, $\underline{p}<.001$. Compared to when he was described as succeeding, when the child was described as having experienced failure in school he was more likely to be viewed as psychologically disturbed before his death ($\underline{M}$=3.2 vs. $\underline{M}$=4.3), and both his mother ($\underline{M}$=3.1 vs $\underline{M}$=4.4) and his father ($\underline{M}$=3.1 vs $\underline{M}$=4.3) were more likely to be viewed as having had the opportunity to be aware of potential problems of the child before they became too serious.

The interaction of school success/failure and type of death was evidenced on several variables, two of which approached and three of which clearly reached typical levels of reliability, as follows: mother's rated responsibility for the child's death, $\underline{F}(1,140)=3.6$, $\underline{p}<.07$ and father's rated responsibility for the child's death, $\underline{F}(1,140)=3.4$, $\underline{p}<.07$; mother's, $\underline{F}(1,140)=14.4$, $\underline{p}<.001$, and father's, $\underline{F}(1,140)=12.0$, $\underline{p}<.0001$, possibility of having been aware of potential problems of the child before they become too serious; rated psychological disturbance of the child, $\underline{F}(1,140)=6.9$, $\underline{p}<.01$.

The pattern of interactions indicated that when the death was due to natural causes, parents were rated as having less responsibility for their child's death when the child was failing school than when he was not; no

such differences were observed when the death was suicidal. For the viral death the child's mother was rated as less responsible for the death of her child when he was failing (M=1.6) than when he was not failing school (M=2.3), $t(73)=2.32$, $p < .05$; when the death was suicidal no such differences were found on ratings of the mothers' responsibility (failure M=4.2; success M=4.2). In a similar way, when the death was due to natural causes, the child's father was rated as less responsible for the child's death when he was failing school (M=1.8) than when he was not (M=2.4), $t(73)=2.34$, $p<.05$; when the death was suicidal no such differences were found on ratings of the father's responsibility (failure M=4.1; success M=4.0).

Ratings of the degree to which parents could have been aware of "potential problems of the child before they became too serious" indicated that while information about the child's success or failure affected ratings for the suicidal death, they did not have an impact on ratings of the parents when the death was due to illness. When the child committed suicide, the child's mother was given reliably higher ratings of opportunity for awareness of the child's problem, when the child was described as failing in school (M=5.6) compared to when he was succeeding (M=3.2), $t(71)=5.67$, $p<.01$; no such reliable difference was found when the death was due to natural causes (failure M=3.2; success M=3.1), $t(73)=.36$, $p>.10$). Similarly, when the child committed suicide, the child's father was given reliably higher ratings of opportunity for awareness of the child's problem when the child was described as failing in school (M=5.4) than when he was succeeding (M=3.2), $t(71)=5.61$, $p<.01$; no such reliable differences were observed when the death was due to natural causes (failure M=3.3; success M=2.9), $t(73)=.94$, $p>.10$.

The rated psychological disturbance of the child before his death was reliably affected by differences in school performance when the death was suicidal, but not when the death was due to illness. For the suicidal death, the child was rated as significantly more disturbed prior to his death when he was described as failing (M=6.2) than when he was described as experiencing success in school (M=4.6), $t(71)=5.11$, $p < .01$; when the death was due to illness, the child was rated as only slightly more disturbed when he failed school (M=2.5) than when he was succeeding in school (M=2.0), $t(73)=1.73$ $p > .05$. Table 1 summarizes the means obtained on the five variables on which the interaction of school performance and type of death reached or approached traditional levels of statistical reliability.

Insert Table 1 About Here

Discussion

Results of the present investigation indicated that information about possible external pressure may directly affect the way in which parents of a child who dies are viewed. More importantly, however, the results indicated that as compared to instances in which children die of disease, parents of the child suicide will face significantly greater amounts of negative impressions and opinions. Compared to parents of children who were described in the newspaper account as dying of a viral illness, parents of children who were described as killing themselves were viewed as more responsible for the child's death, respondents expected to like them less, and the parents were viewed as more likely to have been psychologically disturbed before the child's

death. These findings lend support to other work which has found reactions to the parents of the child suicide to be more negative than to parents of a child who dies of natural causes (Calhoun, Selby & Faulstich, 1980).

The prediction that negative views of the child's parents would be moderated by the presence of external stress was marginally supported by findings for death from disease, but not for the suicidal death. Ratings of parental responsibility were lower when potential external pressures were present only when the death was due to illness; no such attenuation of attributed parental responsibility was evidenced when the death was suicidal. In addition, the ratings of parental responsibility for the child's suicidal death were higher than those for the naturally caused death regardless of the presence of external pressures.

Results also indicated that the ratings of the extent to which the parents could have been aware of potential problems of the child before they became too serious were also jointly affected by the type of death and the described presence of external pressures on the child. Differences on ratings of parental awareness of problems between school failure of the child and school success were not reliable when the death was due to illness. However, when the death was suicidal, parents were expected to have been aware that the child had problems when he was experiencing failure to a reliably greater degree than when he was experiencing success in school. Parents were expected to be able to tell that the child was headed for serious problems when the death was suicidal and when the child had been experiencing school failure.

The pattern of the present results indicates that parents of children who kill themselves are likely to experience reactions from others which are

negative. These initial negative social impressions may guide the behavior of others in at least two ways (Darley & Fazio, 1980). These negative social impressions might lead others to avoid interaction with parents. These impressions might also affect the behavior that is directed toward the parents in face-to-face interactions; given the negative nature of the impressions, we might expect that the interactions themselves might be more negative than in the case in which the child's death was due to illness. These are predictions, however, and require further empirical verification.

In addition to the grief produced by the loss, those who are the survivors of a family member's self-inflicted death are likely to face the difficult task of dealing with the reaction of persons outside the family (Cain, 1972; Rudestam, 1977). How the event could have happened is a question which may be particularly bothersome in the event of a child's death by suicide (Whitis, 1972). Present results support the conclusion that viewing the parents as responsible, and as having had the opportunity to be aware that the child's problems had become serious, are ways in which this question will be answered. In addition, however, present findings indicate that the parents of the child suicide face additional liabilities in the area of social impressions. Not only are parents of the child suicide likely to encounter attitudes which are more negative in general, but factors which may mitigate negative judgments in other circumstances may not when the death is a suicide.

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Footnote

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[1]The authors thank Jerry Shinn of The Charlotte Observer for his comments on the newspaper accounts.

[2]Previous work has indicated that the sex of the child does not have a reliable impact on the perception of the incident (Calhoun, Selby, & Faulstich, 1980).

Table 1

Means for Ratings on Which Interaction of School Success and Type of Death Reached or Approached $p < .05$

Child's School Performance	Type of Death	
	Suicide	Viral Illness
Success	4.2[a]	2.3[a]
	4.0[b]	2.4[b]
	3.2[c]	3.1[c]
	3.2[d]	2.9[d]
	4.6[e]	2.0[e]
Failure	4.2[a]	1.6[a]
	4.1[b]	1.8[b]
	5.6[c]	3.2[c]
	5.4[d]	3.3[d]
	6.2[e]	2.5[e]

[a] Extent to which child's mother responsible for death.

[b] Extent to which child's father responsible for death.

[c] Extent to which mother could have been aware of potential problems.

[d] Extent to which father could have been aware of potential problems.

[e] Extent to which child was psychologically disturbed.